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23409 7590 04/04/2005

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07/06/2005 NNGUYEN2 00000071 502401 09681621

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Barbara A. Johnson (Depositor's name)
Barbara A. Johnson (Signature)
6-29-05 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/681,621	05/10/2001	Kenneth Brakeley Welles II	0391999515-0	4659

TITLE OF INVENTION: LOCATION SYSTEM USING RETRANSMISSION OF IDENTIFYING INFORMATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	07/05/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
HOLLOWAY III, EDWIN C	2635	340-825490

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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ANDRUS, SCEALES, STARKE & SAWALL, LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

**GE medical systems
Information Technologies, Inc.**

Milwaukee, WI

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date 6-29-05

Typed or printed name

Joseph D. Kuborn

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